

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/584966

FILING DATE

27 MAR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		/		/		
4		3		/		
5		1		/		
6		1		/		
7		1		/		
8		1		/		
9		1		/		
10		1		/		
11		1		/		
12		1		/		
13		1		/		
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16		1		/		
17		1		/		
18		1		/		
19		1		/		
20		1		/		
21		1		/		
22		1		/		
23		1		/		
24		1		/		
25	/		/			
26		/		/		
27		/		/		
28		3		/		
29		1		/		
30		1		/		
31		1		/		
32		1		/		
33		1		/		
34		1		/		
35		1		/		
36		1		/		
37		1		/		
38		1		/		
39		1		/		
40		1		/		
41		1		/		
42		1		/		
43		1		/		
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	44	←	41	←		←
TOTAL CLAIMS	46		43			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						